

## Newborn Screening Program

### **Instructions for Completing Pulse Oximetry Monthly Summary Report**

The Pulse Oximetry Monthly Summary Report (MSR) includes required data elements that will help birthing facilities and the ISDH Newborn Screening Program provide timely, appropriate follow-up for all children who do not receive a valid pulse oximetry screen or who do not pass the pulse oximetry screen. **Please read the instructions below when completing your Pulse Oximetry (Pulse Ox) MSR.**

**NOTE:** The Pulse Ox Exception Reporting Form is two (2) pages. Each infant is labeled with an “Infant #.” This will enable you to enter corresponding data on page 2 for a child without re-writing his/her demographic information. You can move between the 2 pages of this form by clicking on the “Page 1” and “Page 2” tabs at the bottom of your Excel screen, or just print off this form from the ISDH Newborn Screening Professionals’ website. **Both pages of this form are required in order for your MSR to be processed!!**

#### **Pulse Oximetry Exception Reporting Form – PAGE 1**

1. Enter your facility’s name and the month for which you are submitting your MSR at the top of the page.
2. **Infant demographic details**

Complete demographic information for the child. **All items marked with an asterisk (\*) are required.** These data points are extremely helpful in identifying accurate matches for children and preventing the creation of duplicate records. **Your MSR will not be processed until all required information is complete.**

**NOTE:** If any required information is missing from your MSR form, a member of the ISDH Newborn Screening Program staff will be calling you to obtain the missing information. If ISDH does not obtain the missing information before your MSR is due, your MSR will be considered late.

3. **Transfer details**

- a. Enter a transfer option for each child. **You must select a transfer code for every child on your MSR.**  
Transfer codes include:

- i. **Not transferred** (code a) – This child was born in your facility and was not transferred to another facility before he/she received a valid pulse oximetry screen.
- ii. **Transferred out of your facility** (code b) – This child was born at your facility, but was transferred to another facility before he/she received a valid pulse oximetry screen.
- iii. **Transferred into your facility** (code c) – This child was born at another facility, but was transferred to your facility before he/she received a valid pulse oximetry screen.

***If you chose “Transferred out” or “Transferred in,” enter the date the child was transferred in/out of your facility (“Date of transfer”) and the name of the other facility involved in the transfer (“Name of other facility involved in transfer”) box.***

#### 4. Exception details

- a. Select an exception code for each child. **You must select an exception code for every child on your Pulse Ox MSR.** Exception codes include:

i. **Transfer only** (code 1)

This code is for children who were transferred out of your facility before receiving a valid pulse oximetry screen.

ii. **Finally screened** (code 2)

This code is for children who were:

- Transferred into your facility & received a valid pulse oximetry screen before you submitted your MSR

**OR**

- Children who were “holdovers” from the previous month’s MSR and received a newborn screen during this calendar month.
  - There are three “holdover” exception codes, including the following: “NICU,” “Initial screen next month,” or “Discharged HOME without pulse oximetry screen.”

***If you select this option, please enter the date that the child received his/her pulse ox screen in the “Date of transfer/pulse ox/death/Religious Waiver/discharge” box.***

iii. **NICU** (code 3)

This code is for a child who did not receive his/her NBS because he/she is in the NICU. Children with the “NICU” exception code are considered “holdovers” and will need to be updated next month. **See the Pulse Oximetry MSR FAQs for more information on how to update “holdovers.”**

**NOTE:** If your facility does not have a NICU, you should NOT use this exception code!

iv. **Initial screen next month** (code 4)

This code is for children who were born at the end of a calendar month and **were not old enough to receive a valid pulse oximetry screen before your MSR is submitted.**

If a child is born at the end of the calendar month, **but receives a valid pulse oximetry screen before you submit your MSR,** you do NOT need to report the child on your Pulse Ox MSR.

Children with the “Initial screen next month” exception code are considered “holdovers” and will need to be included on your next MSR (typically, these children will be reported as “Finally Screened” exceptions the following month). **See the Pulse Oximetry MSR FAQs for more information on how to update “holdovers.”**

v. **Deceased** (code 5)

This child did not receive a pulse oximetry screen because he/she died before he/she was old enough to receive a valid pulse ox screen.

*If you select this option, please enter the child's date of death in the "Date of transfer/pulse ox /death/Religious Waiver/discharge" box.*

vi. **Religious Refusal** (code 6)

Children with this exception code did not receive a valid pulse oximetry screen because their parents/legal guardians completed & signed a Religious Waiver declining the screen.

*If you select this option, please enter the date that the child's parents/legal guardians signed the Religious Waiver in the "Date of transfer/pulse ox /death/Religious Waiver/discharge" box.*

**NOTE:** Be sure to send a copy of the completed, signed Religious Waiver to the ISDH Newborn Screening Program via fax (317-234-2995) with your completed MSR.

**NOTE:** Indiana's newborn screening law states that parents/legal guardians may ONLY refuse newborn screening (including heelstick, pulse oximetry, and hearing screening) based on the parents'/legal guardians' religious beliefs. The ISDH Newborn Screening Program has asked all birthing facilities to review the form your facility currently uses if parents refuse newborn screening. If this form does not clearly indicate that the parents/legal guardians are refusing based on their religious beliefs (for example, a generic "Refusal of Newborn Care" form), this form will no longer be accepted by the ISDH Newborn Screening Program.

A copy of the state Religious Waiver form can be found on the ISDH Newborn Screening Professionals' website at <http://www.in.gov/isdh/20381.htm>. Alternatively, your facility may develop its own religious refusal form for newborn screening—but the form must clearly indicate that parents/legal guardians are objecting to part/all of the newborn screening based on their religious beliefs and not for any other reason. If you have any questions about your facility's religious refusal form, please contact Courtney Eddy, INSTEP Director, at [CEddy@isdh.IN.gov](mailto:CEddy@isdh.IN.gov).

vii. **Discharged HOME without pulse oximetry screen** (code 7)

This exception code is for children who did not receive a valid pulse oximetry screen before he/she was discharged home. This does **NOT** include children who are discharged from your facility to be transferred to another birthing facility (e.g., to be transferred to the NICU at a nearby hospital).

*If you select this option, please enter the date that the child was discharged in "Date of transfer/pulse ox /death/Religious Waiver/discharge" box.*

**NOTE:** Any child who is discharged HOME from your facility without receiving a valid pulse oximetry screen **must** be immediately reported by phone to the INSTEP Director (317-233-9260)!

viii. **Prenatally/postnatally diagnosed with CCHD (code 8)**

This exception code is for children who will not receive pulse oximetry screening because they were prenatally or postnatally (prior to 24 hours of age) diagnosed with critical congenital heart disease (CCHD, also called critical congenital heart defects). These are infants who were prenatally/postnatally diagnosed with at least one of the following heart defects:

- Hypoplastic left heart syndrome (HLHS)
- Pulmonary atresia
- Tetralogy of Fallot (TOF)
- Total anomalous pulmonary venous return (TAPVR)
- Transposition of the great arteries (TGA)
- Tricuspid atresia
- Truncus arteriosus

ix. **Did not pass pulse oximetry screen – referred for additional follow-up (code 9)**

This exception code is for children who do not pass the pulse oximetry screen (as defined in Indiana's pulse oximetry screening protocols) &, therefore, need to be referred to a pediatric cardiologist for additional follow-up.

***Please verify these children's pulse oximetry results before you enter him/her on your MSR.*** Children who do not pass the pulse oximetry screen should have one of the following types of results:

- Child had three (3) consecutive pulse oximetry screens where his/her readings were < 95% in BOTH the right hand & foot
- Child had three (3) consecutive pulse oximetry screens where his/her readings showed a difference of > 3% between the right hand & foot
- Child had one (1) pulse oximetry reading that was < 90% saturation (in either hand or foot)

***If you select this option, enter the name of the facility to which this child was referred for additional follow-up (including echocardiogram) in the "Name of other facility involved in transfer OR name of referral facility" box.***

*Continue to the next page for information on how to complete Page 2 of the Pulse Oximetry Exception Reporting Form & the Pulse Oximetry MSR Cover Sheet.*

## **Pulse Oximetry Exception Reporting Form – PAGE 2**

1. Enter your facility's name and the month for which you are submitting your MSR at the top of the page.

2. **Mother's demographic details**

Complete demographic information for the child's biological mother. **All items marked with an asterisk (\*) are required.** These data points are extremely helpful in identifying accurate matches for children and preventing the creation of duplicate records. **Your MSR will not be processed until all required information is complete.**

3. **Primary care provider's demographic details**

Complete demographic information for the child's primary care provider. **All items marked with an asterisk (\*) are required. Your MSR will not be processed until all required information is complete.**

**NOTE:** Each child is labeled on page 1 of the Pulse Oximetry Exception Reporting Form with an "Infant #." This will enable you to complete corresponding data on page 2 without re-entering the child's demographic information.

**NOTE:** If any required information is missing from your MSR form, a member of the ISDH Newborn Screening Program staff will be calling you to obtain the missing information. If ISDH does not obtain the missing information before your MSR is due, your MSR will be considered late.

### **Summary Statistics**

Complete all fields on the "Pulse Oximetry MSR – Cover Sheet" form. If your facility's contact information has changed, please check the box to help the ISDH Newborn Screening Program maintain current e-mail and phone distribution lists.

Completed reports are due to the ISDH Newborn Screening Program by 5 pm EST on the first business day after the 14<sup>th</sup> of the following month. Most of the time, MSRs will be due by 5 pm EST on the 15<sup>th</sup>; however, if the 15<sup>th</sup> falls on a weekend, the MSRs are due by 5 pm EST the following Monday. Please submit your MSR to:

Courtney Eddy, INSTEP Director

(317) 234 – 2995 (fax)

[CEddy@isdh.IN.gov](mailto:CEddy@isdh.IN.gov) (Certified/Secure e-mail ONLY)